## **Experience Questionnaire**

## Instructions (numbers below correspond to numbers contained in the questionnaire)

- 1. Give name and location of the project for which this questionnaire is being submitted. Provide appropriate data from the Commerce Business Daily (CBD) announcement identifying the particular project for which this questionnaire is being submitted.
- 2. Give the date of the Commerce Business Daily in which the project announcement appeared, or indicate "not applicable" (N/A) if the source of the announcement is other than the CBD. Indicate RFP number as provided in the CBD announcement.
- Show date on which questionnaire is prepared. All information submitted shall be current and accurate as of this date.
- 4. Type accurate and complete name of Offeror, its mailing/delivery address and World Wide Web address if any.
  - a. Indicate whether questionnaire is being submitted on behalf of a parent firm, a branch/subsidiary or joint venture office (branch/subsidiary office submissions should list only personnel in, and experience of, that office).
  - b. Give the address of the specific office which will have responsibility for performing the announced work.
  - c. Provide date the Offeror was established under the name shown in item 4.
  - d. Branches or subsidiaries of large or parent companies, or conglomerates, should insert name and address of highest-tier owner.
  - e. If present Offeror is the successor to, or outgrowth of, one or more predecessor firms, show name(s) of former entity(ies) and the year(s) of their original establishment.
  - f. List the name, title, and telephone number of that principal who will serve as the point of contact. Such an individual must be empowered to speak for the Offeror on policy and contractual matters and should be familiar with the programs and procedures of the agency to which this questionnaire is directed.
- 5. Check appropriate boxes indicating if Offeror is (a) large business; (b) a small business; (c) concern a small business concern owned and operated by socially and economically disadvantaged individuals; and, (d) woman-owned (See 48 CFR 19.101 and FAR 52.219-9).
- 6. Describe the primary line of business and the categories of work that the Offeror normally performs with its own forces.
- 7. Legal Structure Information In order to be eligible for this project, Offeror organizations must legally exist prior to the time of Contract award. If the Offeror's organization legally exists or has been formed for this project, identify the nature of the entity or other arrangement. If the Offeror has not yet been formed, provide a brief description of the proposed legal structure. State whether major participants will have joint and several liability and/or identify any limitations of liability as between the organization's principal members. NEW FIRMS (not reorganized or recently-amalgamated firms) are eligible and encouraged to seek work from the Government in connection with performance of projects for which they are qualified. Such Offerors are encouraged to complete and submit this questionnaire. Questions dealing with personnel or experience may be answered by citing experience and capabilities of individuals in the firm based on performance and responsibility while in the employment of others.

Legal Organization, licensing and filings - Specify type of organization by indicating type of ownership, or legal structure, of entity (corporation, incorporated joint venture, partnership, or joint venture partnership).

- a. List jurisdictions and trade categories in which Offeror is legally qualified to do business, and indicate registration or license numbers, if applicable.
- b. List jurisdictions in which Offeror's corporation, partnership, joint venture or trade name is filed.
- c. Answer only if this questionnaire is being submitted by an Offeror that is a corporation or incorporated joint venture.

- d. Answer only if this questionnaire is being submitted an Offeror that is a partnership, joint venture partnership, or partnership including corporations.
- e. Indicate, by checking the appropriate box, whether the Offeror is a legally existing entity.
- 8. Office locations, telephone numbers and number of personnel:
  - a. Beginning with the submitting office, list location, telephone numbers, and number of personnel for all associated or branch offices, (including any headquarters or foreign offices) which provide related services.
  - b. Show total personnel in all offices (should be sum of all personnel, all branches).
- 9. The Offeror shall list names and addresses of all such individuals or firms, as well as their particular areas of technical/professional expertise, as it relates to this project. Existence of previous working relationships should be noted. If the Offeror has more entries than space provided, the Offeror may attach an additional sheet containing requested information.
- 10. Using the tables provided, insert the appropriate index number to state average annual amount of travel service work by Offeror for the current calendar year (projections are allowed) and last four (4) calendar years, as well as the average annual amount over the five (5) years. The current year should be indicated first and the last four (4) years should be indicated in descending order (e.g., 1999, 1998, 1997, 1996 and 1995).
- 11. List up to five (5) projects worked on in the past five (5) years which demonstrate the Offeror's experience as it relates to capability to perform work similar to that likely to be required on this project. State the year work on that particular project was, or will be, commenced and completed. Show the estimated cost for that portion of the project for which the Offeror was primarily responsible.
- 12. Provide brief resumes for the key personnel and not more than a total of four resumes expected to participate on this project. If individual has more than one highest degree, such as two Ph.D.'s, list both. If an individual is registered in several fields show all fields; if registered in several states, do not list states. Present a synopsis of the individual's experience, training, or other qualities which reflect potential contribution to this project. Include such data as: familiarity with Government procedures, similar type of work performed in the past, management abilities, etc. Please limit synopsis of experience to directly relevant information.
- 13. Through narrative discussion, indicate reasons why the Offeror believes it is especially qualified based upon experience to undertake the project.

  Offerors may say anything they wish in support of their qualifications or to demonstrate capabilities of Offeror. This item shall not exceed the five (5) pages provided in the questionnaire. Additional data, brochures, photos, etc. should not accompany the questionnaire.
- 14. Completed forms should be signed and dated by a corporate officer or principal of the Offeror.

## ALL INFORMATION CONTAINED IN THE QUESTIONNAIRE SHOULD BE CURRENT AND FACTUAL.

Questionnaire				
1.	Travel Area(s) for which Offeror requests consideration for award:			
2.	Commerce Business Daily Announcement Date and RFP Identification Number:			
3.	Date Questionnaire Prepared:			
4.	Offeror Name, Business Address & Worldwide Web Address (if any):			
	a. Submittal is for: Parent Company Branch/Subsidiary Office Joint Venture Office			
	b. Year Offeror Established:			
	c. Name of Parent Company, if any:			
	d. Former Parent Company Name(s), if any, and Year(s) Established:			
	e. Name, Title, Telephone Number and e-mail Address (if any) of Primary Contact:			
5.	Specify type of ownership by checking below, if applicable.			
	Large Business Small Business Small Disadvantaged Business Woman-owned Business			

	E	Experience Questionnaire
6.	Describe primary line of Business that the Offeror normally performs with its own forces:	
7.	Legal Organization, licensing and filings. Specify type of organization by checking below:	
	Corporation Limited Liability Corporation Incorporated Joint Venture Partnership Joint Venture Partner	ship
	a. List jurisdictions and trade categories in which Offeror is legally qualified to do business, and indicate registration or license numbers.	ers, if applicable:
	b. List jurisdictions in which Offeror's corporation, partnership or trade name is filed:	
	c. If Offeror is a corporation or incorporated joint venture, answer the following:	
	i. State of incorporation:	
	ii. Type of corporation (if applicable):	
	iii. President's name:	
	iv. Vice-president's name(s):	
	v. Secretary's name:	
	vi. Treasurer's name:	

				Experience
	d.	If Offeror is a partnersh	nip or a joint venture partnership, answer the following;	
		i. Date of organizatio	on:	
		ii. Type of partnership	o (if applicable):	
		iii. Name(s) of general	I partner(s):	
	e.	Is the Offeror a legally	existing entity? Yes No	
8.	Lis	t Offeror Current Offices	s and Information:	
	a.	City/State/Telephone/N	lumber of Personnel in Each Office	
	b.	Total Personnel		
			subcontractors anticipated for this project.	
S	peci	alty	Consultants/Subcontractor Name & Address	Worked with Offeror before (Yes or No)
1				
2				
3				

10. Summary of Travel Service Volume including Government Official, Government Leisure and Industry or Non-Government travel services over the last five (5) Calendar years (current year first; insert index number from appropriate index listing below:

Volume of Travel Services	19	19	19	19	19	Average
Government Official						
Government Leisure						
Non-Government						

## **Travel Management Services Volume Index:**

<u>Index</u>	<u>Volume</u>
1	Less than \$1 million
2	\$1 million to \$5 million
3	\$5 million to \$15 million
4	\$15 million to \$25 million
5	\$25 million to \$35 million
6	\$35 million to \$50 million
7	\$50 million or greater

<b>Experience</b> Questionnai
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11.		licate work by the Offeror in the last five years which best illustrates experience rele Project Name & Location:	evant to this project.	
	b.	Nature of Firm's Responsibility:		
	c.	Project Owner's Name & Address:		
	d.	Start Date (actual or estimated):		
	e.	Completion Date (actual or estimated):		
	f.	Estimated Volume of Work for Entire Project: \$ Work for Whice	ch Firm Is Responsible: \$	

		Experience Questionnaire
g	The Offeror is encouraged to submit additional information to help demonstrate experience relevant to the project:	
		Page 8 of 26

		Experience Questionnaire
11. (co	continued). Indicate work by the Offeror in the last five years which best illustrates experience relevant to this p	roject.
a.	. Project Name & Location:	
b.	. Nature of Firm's Responsibility:	
C.	. Project Owner's Name & Address:	
d.	. Start Date (actual or estimated):	
e.	c. Completion Date (actual or estimated):	
f.	Estimated Volume of Work for Entire Project: \$ Work for Which Firm Is Responsible: \$	

			Experience Questionnaire
g	١.	The Offeror is encouraged to submit additional information to help demonstrate experience relevant to the project:	
			Page 10 of 26

11. (co	ontinued) Indicate work by the Offeror in the last five years which best illustrates experience relevant to this project.	
a.	Project Name & Location:	
b.	Nature of Firm's Responsibility:	
C.	Project Owner's Name & Address:	
d.	Start Date (actual or estimated):	
e.	Completion Date (actual or estimated):	
f.	Estimated Volume of Work for Entire Project: \$ Work for Which Firm Is Responsible: \$	

	Experience Questionnaire
g. The Offeror is encouraged to submit additional information to help demonstrate experience relevant to the project:	

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11. (continued) Indicate work by the Offeror in the last five years which best illustrates experience relevant to this project.  a. Project Name & Location:  b. Nature of Firm's Responsibility:  c. Project Owner's Name & Address:  d. Start Date (actual or estimated):  e. Completion Date (actual or estimated):  f. Estimated Volume of Work for Entire Project: \$ Work for Which Firm Is Responsible: \$			Experience Questionnaire
<ul> <li>b. Nature of Firm's Responsibility:</li> <li>c. Project Owner's Name &amp; Address:</li> <li>d. Start Date (actual or estimated):</li> <li>e. Completion Date (actual or estimated):</li> </ul>	11. (cc	ontinued) Indicate work by the Offeror in the last five years which best illustrates experience relevant to this project.	
c. Project Owner's Name & Address:  d. Start Date (actual or estimated):  e. Completion Date (actual or estimated):	a.	Project Name & Location:	
<ul><li>d. Start Date (actual or estimated):</li><li>e. Completion Date (actual or estimated):</li></ul>	b.	Nature of Firm's Responsibility:	
e. Completion Date (actual or estimated):	C.	Project Owner's Name & Address:	
	d.	Start Date (actual or estimated):	
f. Estimated Volume of Work for Entire Project: \$ Work for Which Firm Is Responsible: \$	e.	Completion Date (actual or estimated):	
	f.	Estimated Volume of Work for Entire Project: \$ Work for Which Firm Is Responsible: \$	

		Experience Questionnaire
g.	The Offeror is encouraged to submit additional information to help demonstrate experience relevant to the project:	

	Experience	Questionn	aire
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		Experience Questionnaire
11. (cd	continued) Indicate work by the Offeror in the last five years which best illustrates experience relevant to this project.	
a.	Project Name & Location:	
b.	. Nature of Firm's Responsibility:	
C.	Project Owner's Name & Address:	
d.	. Start Date (actual or estimated):	
e.	Completion Date (actual or estimated):	
f.	Estimated Volume of Work for Entire Project: \$ Work for Which Firm Is Responsible: \$	

	Experience Questionnaire
g. The Offeror is encouraged to submit additional information to help demonstrate experience relevant to the project:	
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Experience Questionnaire
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12.	Bri	ef resume of key persons, specialist, and individual consultants anticipated for this project.	
	a.	Name & Title:	
	b.	Project Assignment:	
	c.	Anticipated percent of their time that will be committed to this Project: %	
	d.	Current Employer:	
	e.	Years experience: With Current Employer With Other Employers	
	f.	Education and Specialized Training: degree(s)/graduation date(s)/fields or specialization.	
	g.	Active Registration and Licensing: Year First Registered/State/Discipline:	
	h.	Summary listing of relevant projects:	
	i.	Other Experience and Qualifications relevant to the proposed project:	

Ex	perie	ence	Que	estion	naire

		Experience Questionnaire
12. (cd	ontinued).	
a.	Name & Title:	
b.	Project Assignment:	
C.	Anticipated percent of their time that will be committed to this Project: %	
d.	Current Employer:	
e.	Years experience: With Current Employer With Other Employers	
f.	Education and Specialized Training: degree(s)/graduation date(s)/fields or specialization.	
g.	Active Registration and Licensing: Year First Registered/State/Discipline:	
h.	Summary listing of relevant projects:	
i.	Other Experience and Qualifications relevant to the proposed project:	

Ex	perie	ence	Que	estion	naire

		Experience Questionnaire
12. (cc	ontinued).	
a.	Name & Title:	
b.	Project Assignment:	
C.	Anticipated percent of their time that will be committed to this Project: %	
d.	Current Employer:	
e.	Years experience: With Current Employer With Other Employers	
f.	Education and Specialized Training: degree(s)/graduation date(s)/fields or specialization.	
g.	Active Registration and Licensing: Year First Registered/State/Discipline:	
h.	Summary listing of relevant projects:	
i.	Other Experience and Qualifications relevant to the proposed project:	

Ex	perie	ence	Que	estion	naire

		<b>Experience</b> Questionnaire
12. (co	ntinued).	
a.	Name & Title:	
b.	Project Assignment:	
C.	Anticipated percent of their time that will be committed to this Project: %	
d.	Current Employer:	
e.	Years experience: With Current Employer With Other Employers	
f.	Education and Specialized Training: degree(s)/graduation date(s)/fields or specialization.	
g.	Active Registration and Licensing : Year First Registered/State/Discipline:	
h.	Summary listing of relevant projects:	
i.	Other Experience and Qualifications relevant to the proposed project:	

ı	Experience Questionnaire
13. Use the next five pages to provide additional relative information specifically addressing Evaluation Factor 2, Relative Capability - Exinformation shall be provided in a narrative format.	perience. This

	Experience Questionnaire
13. (continued).	

	Experience Questionnaire
13. (continued).	

	Experience Questionnaire
13. (continued).	

	Experience Questionnaire
13. (continued).	
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	Experience Questionnaire
14. The foregoing is a statement of facts.	
Signature:	
Printed Name:	
Date:	